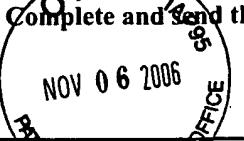


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Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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7590 09/27/2006

Gerhardt Gomez & Haskins, LLP
730 W. Randolph St.
3rd Floor
Chicago, IL 60661
11/07/2006 MWOLGE2 00000023 10679156

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<i>Michael D. Gerhardt</i>	(Depositor's name)
<i>ca-1/30/06</i>	(Signature)
<i>10/30/2006</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/679,156	10/03/2003	Frederick H. Grenning	5320/55488	3953

TITLE OF INVENTION: DECHLORINATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0	\$700	12/27/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAVAGE, MATTHEW O	1724	210-205000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Typed or printed name *Michael D. Gerhardt*

Date *10/30/2006*

Registration No. *48,397*

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